

In-Service Education Workbook

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Credits

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Notice to the Readers

Though the guidelines contained in this text are based on consultations with healthcare professionals, they should not be considered absolute recommendations. The instructor and readers should follow employer, local, state, and federal guidelines concerning healthcare practices. These guidelines change, and it is the reader's responsibility to be aware of these changes and of the policies and procedures of her or his healthcare facility/agency.

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Establishing Trust Through Communication with the Elderly

(2 credits)

After completing this section you should be able to:

1. Describe the effects of body language and facial expressions on communication
2. Discuss important steps to establishing trust with the persons in your care
3. Describe the use of touch as an effective communication tool
4. List five good communication skills to use with the elderly persons in your care
5. List guidelines for communicating with residents or clients with special needs
6. Explain HIPAA and list ways to protect confidentiality

1. Describe the effects of body language and facial expressions on communication



Nonverbal communication is communicating through tone of voice, body language, facial expressions, mannerisms, gestures, drawing pictures, touching and any other unspoken or nonverbal behavior.

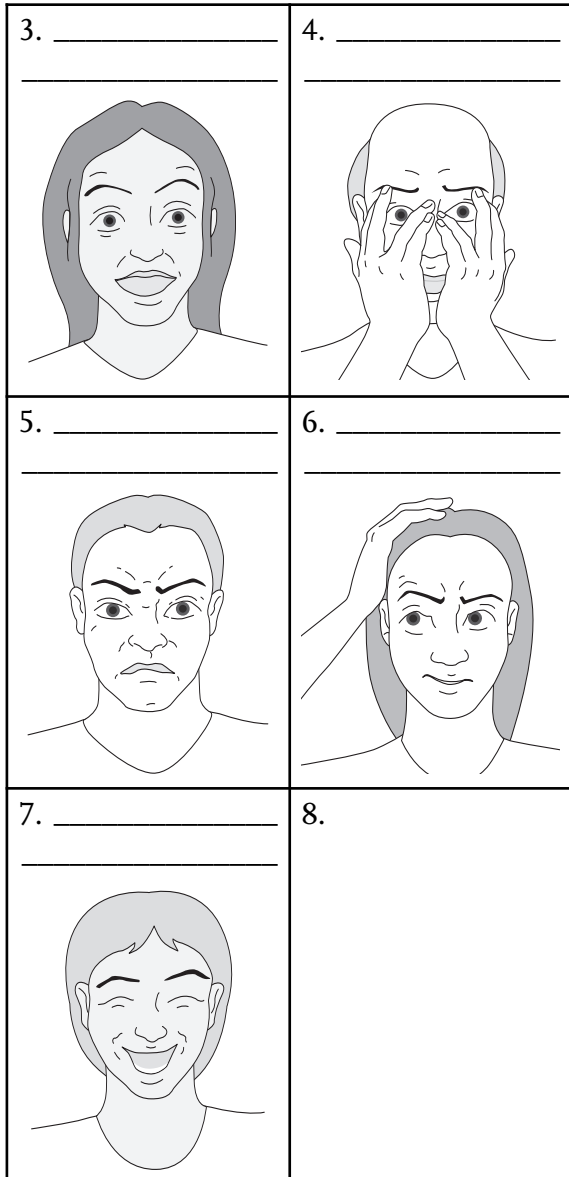
Body language conveys messages, even if we are not aware of it. Some examples of body language include leaning your chin on your hand, slouching, sitting up straight, crossing your arms, making eye contact, avoiding eye contact, crossing your legs, pacing, making a fist, tapping your fingers, and so on.

Facial expressions convey as much meaning as spoken words. To illustrate how important our expressions are, think of why a good “poker face” is so valuable to a serious poker player. Expressions give us away as easily as words. If someone you are caring for says she is feeling fine but

her face looks pained, you are getting two different messages: one verbal and the other nonverbal. This is called a mixed message. Ask for clarification when you receive a mixed message from someone in your care.

Directions. Look at each of the boxes below, and decide what emotion you see in each of the seven faces. Then briefly describe it on the line provided. In the last box, draw your own happy face.

1. _____ _____ 	2. _____ _____ 
---	--



Directions. Look at the boxes to the right. Choose three emotions from the nine given in the boxes. Then write three different sentences, each one describing a situation when you felt those emotions while doing your job.

8. _____

9. _____

10. _____

Sad	Happy	Lonely
Angry	Frustrated	Scared
Bored	Pleased	Excited

2. Discuss important steps to establishing trust with the persons in your care

Appearance and attitude play an important role in the process of communication for health caregivers. The first impression a person has of a new aide or assistant is based on appearance and attitude. A neat, professional appearance gives the person in your care a feeling of security from knowing that his or her health care is in professional hands. Along the same lines, your attitude sends messages to the person in your care. Keep in mind the three “C’s” of good care:

- I am **confident** in my job.
- I am a **caring** person.
- I am **cheerful** and happy to be helping you get well.

Once you have displayed this professional appearance and attitude, you can begin to develop the basis of all healthcare relationships: TRUST!

There are eight important steps to establishing trust with the persons in your care:

1. Be on time.
2. Introduce yourself using the name you wish the person to address you by.
3. Ask what name the person prefers you to use in addressing him or her. Use that name frequently.

- 4. Be sensitive to impairments to such functions as vision, hearing, or ambulation.
- 5. Keep all resident/client information confidential. Respect the privacy of the person in your care, as well as the privacy of the family.
- 6. Keep your promises and agreements.
- 7. Explain what you are going to do before you do it.
- 8. Offer choices whenever possible.

Once a basis of trust has been established, you should utilize and build upon this mutual trust every time you interact with every person in your care.



Directions. Think of some examples not listed above that can help you establish trust with the persons in your care.

1. _____

2. _____

3. _____

4. _____

5. _____

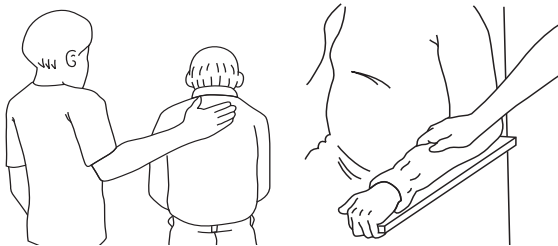
3. Describe the use of touch as an effective communication tool

The use of touch as an effective communication tool has been established in many research studies. Following are some non-threatening, safe ways to use touch to send positive messages:

- Extend your hand to the person
- Place arm around the person's shoulders
- Pat the person's back or shoulder
- Hold the person's hand
- Touch the person's arm or hand

Touch can be accompanied by other non-verbal forms of communication, such as a smile, or by verbal communication such as a word or phrase that conveys caring. What messages can touch give?

I care.	I am here.	Please relax; you are safe.
I will assist you.	I want you to feel better.	I have time for you.



Some people are less comfortable being touched. Ask permission before touching residents or clients. Be sensitive to their feelings. You must touch residents/clients in order to do your job. However, recognize that some people feel more comfortable when there is little physical contact. Learn about your residents/clients and adjust care to their needs.

Directions. Describe a healthcare situation in which you could apply each of the six messages of touch to your residents/ clients as you care for them.

- I care: _____

- I am here: _____

- Please relax; you are safe: _____

- I will assist you: _____

- I want you to feel better: _____

- I have time for you: _____

4. List five good communication skills to use with the elderly persons in your care

Directions. Please rate your feelings and/or attitudes about the following statements by giving each a number value as shown below:

- 1 = Don't agree
- 2 = Sometimes agree
- 3 = Strongly Agree

- _____ Most older persons are boring and have boring stories to tell.
- _____ My experience with caring for the elderly has been mostly unpleasant. They tend to be grumpy.
- _____ Elderly persons cannot change their habits because they can't learn new things.

4. ____ Most elderly persons feel useless and unfulfilled.
5. ____ The elderly have a poor sense of humor.
6. ____ I am not looking forward to growing old.
7. ____ Elderly persons can't teach me anything about life because I have nothing in common with them.

When you are finished with the questionnaire, add up your score. Rate your attitude about aging and the elderly based on the numbers given below.

Highest score is 21. Lowest score is 7.

- 7-11 You have a positive attitude about aging and the elderly.
- 12-17 Consider rethinking your attitude about aging and the elderly.
- 18-21 Consider spending more time with an aging relative or an older person whom you are fond of. Share your feelings.

Your job as an aide or assistant is to use good observation and communication skills with the persons in your care and with the healthcare team. Sometimes communicating with the elderly requires special skills. Personal sensitivity is a great asset in determining the day-to-day condition of those in your care.

A good time to observe those in your care is during personal care. As you give a bed bath, shampoo hair, and soak feet, you can also communicate and gain important information. During this time you should keep in mind that some elderly persons

sometimes think more slowly and speak more slowly than other people. Do not make them feel rushed, or they might become confused or angry. If a person in your care is upset and cannot verbally explain why, offer comfort and reassurance. Pushing him to explain may make him more upset.

When communicating with the elderly, keep noise and distraction to a minimum. Use short, simple words and sentences. It is very important to know if the person has any visual, or hearing, or speaking impairments. Make sure they are wearing any assistive devices that they may need, such as hearing aids or glasses.

The following five skills help to promote good communication between you and the elderly persons in your care:

1. Do not rush an elderly person. This may cause frustration and nervousness, which leads to confusion.
2. Listen attentively. Being a good listener is a skill that will benefit you in all areas of communication, including professional and personal situations.
3. Always show respect for the elderly and the experience and wisdom they possess. Residents and clients are people, not just lists of illnesses and disabilities. Many have had rich and wonderful lives.
4. Never change the established routine. There is security and stability in day-to-day routines.
5. Do not criticize an older person for being slow. This is a normal trait of aging and if you are lucky, you will grow old some day also.



It is important to remember that not all the elderly have hearing, vision, memory, or mental function impairments. In fact, many hear, see, understand, and speak as well as (or better than) much younger people. Get to know the person in your care. Understand and accommodate his special communication needs.

Directions. Fill in the correct words from the handout to describe the skills for communication with the elderly.

- 8. Don't _____ the elderly person.
- 9. Listen _____.
- 10. Always _____ respect.
- 11. Never _____ the established routine.
- 12. Don't _____ an older person.



Mrs. D is an elderly widow who lives alone. She recently suffered a stroke and needs a home health aide to assist her with the activities of daily living: bathing,

grooming, dressing, eating, and range of motion exercises. She has had three different home health aides come to her house, but she hasn't felt comfortable with any of them.

Directions. Briefly answer questions 13-16 on the lines provided.

Aide #1

The first home health aide showed up at the door an hour later than she was supposed to, wearing frayed blue jeans and a T-shirt, her hair still wet from a shower. To make matters worse, she didn't even introduce herself before barging into the house.

- 13. What skills does the first home health aide need to learn?

Aide #2

The second home health aide looked all right, but she talked non-stop and didn't let Mrs. D get a word in edgewise. What's more, she was bossy, insisting that Mrs. D get out of bed and get dressed before eating breakfast. All her other clients did it this way, and she didn't see why Mrs. D should be any different. Laziness, that's what it was.

- 14. What skills does the second home health aide need to learn?

Aide #3

The third home health aide kept finishing Mrs. D's sentences for her in an effort to speed things along. He said that he had company at home and wanted time to visit with them. Although he promised to